



# AMENDMENT FORM

## ADD TO or REMOVE FROM a GROUP

**Mail to:** UWAS PO BOX 30389, Salt Lake City, UT 84130-0389 **OR** Overnight Mail to 185 N Maine St. Fallon, NV 89406

CHECK CURRENT PROCLAMATION FOR AMENDMENT DEADLINE FOR THE DRAW APPLICATION YOU ARE AMENDING.

*Amendments to applications that cause rejection may not be processed by the division.*

### Step #1) Person requesting amendment:

Customer ID # or (SSN)	Last Name	First Name	M.I.	Date of Birth
Day Phone Number	Mailing address			
( )				

### Step #2) Which draw is this amendment for:

#### Big Game

☐ General Deer; ☐ Limited Entry Deer; ☐ Limited Entry Elk; ☐ Limited Entry Pronghorn; ☐ Youth Elk

#### Antlerless

☐ Deer; ☐ Elk; ☐ Pronghorn

### Step #3) Is this amendment for: (please check **one** of the following)

☐ Addition of a Group member\* (go to Step #4) **OR** ☐ Removal of a Group member\*\* (go to Step #5)

\*If your amendment is to add an individual(s) to your application, all individuals **MUST** already have submitted an application by the application deadline date. **NO EXCEPTIONS.**

\*\*Removal of a member from a group **DOES NOT** remove the individuals application from the drawing. The individual will still have a valid application with the hunt choices originally submitted for the group.

### Step #4) Addition of a Group Member – Provide the following information for **ALL** group member(s) to be ADDED:

(If adding more than three individuals to your group (for general deer only), please provide the same information on the back of this form.)

Customer ID # or (SSN)	Last Name	First Name	M.I.	Date of Birth
1.				
2.				
3.				
4.				

**Total number of applicants in group after addition of member(s):** \_\_\_\_\_

### Step #5) Removal of a Group Member - Provide the following information for **ALL** group member(s) to be REMOVED:

(If removing more than four individuals from your group (for general deer only), please provide the same information on the back of this form.)

Customer ID # or (SSN)	Last Name	First Name	M.I.	Date of Birth
1.				
2.				
3.				
4.				

**Total number of applicants in group after removal of member(s):** \_\_\_\_\_

If you have questions regarding this amendment form, please call **(800) 221-0659**.

This form **MUST** have a notarized signature. (Amendments received without a notarized signature will be returned to you.)

Notary Public: \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

Signature of individual requesting amendment

Date

Revised 10/06

#### For Division use only:

Rcv'd \_\_\_\_\_ App # \_\_\_\_\_ Date Processed \_\_\_\_\_ Processed By \_\_\_\_\_ Date Stated \_\_\_\_\_ Stated By \_\_\_\_\_